1.08092155594

POTENTIAL HAZARDOUS WASTE SITE

REGION SITE NUMBER (to be some VIII

| The second of th | IINARY ASSE: | SMEN I |] | LA BARRACIÓN | | | | | | | |
|--|--|--|---|--|--|--|--|--|--|--|--|
| NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections. | | | | | | | | | | | |
| GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment), File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460. | | | | | | | | | | | |
| I. SITE IDI | ENTIFICATION | | LECTRONICAL PROPERTY CONTRACTORS | en enne kronistan en kronistan op 1905 (12 mars) (12 mars) (13 kansan et kronistan et kronistan (13 kansan et k I | | | | | | | |
| A. SITE NAME Colorado Methane: | | other identifier) | | | | | | | | | |
| Riverside Baptist Church Now MAPEN 2 HURE IT 455 South Platte River Dr. | | | | | | | | | | | |
| C. CITY | | | | | | | | | | | |
| | | | | | | | | | | | |
| G. OWNER/OPERATOR (II known) | | | | | | | | | | | |
| 1. NAME | | | 2. TELEP | PHONE NUMBER | | | | | | | |
| Happy Church | | | | | | | | | | | |
| H. TYPE OF OWNERSHIP | | | | | | | | | | | |
| 1. FEDERAL 2. STATE 3. COUNTY 4 MUNICIPAL XX 5 PRIVATE 6 UNKNOWN 005636 | | | | | | | | | | | |
| I. SITE DESCRIPTION | | | | | | | | | | | |
| Site and parking lot located on site Church | | | | | | | | | | | |
| J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.) | | | | K. DATE IDENTIFIED | | | | | | | |
| Records, municipal survey, and contrac | ted study | | adirect manage. Leading | (mo., day, & yr.) | | | | | | | |
| L. PRINCIPAL STATE CONTACT | | | | | | | | | | | |
| ' NAME Ken Waesche | | | 2. TELEF | PHONE NUMBER | | | | | | | |
| Real Macocae | | | (303) | 320-2333 | | | | | | | |
| II. PRELIMINARY ASSESSMI | ENT (complete | this section last) | demography state of the state of the | | | | | | | | |
| II. PRELIMINARY ASSESSMENT (complete this section last) A. APPARENT SERIOUSNESS OF PROBLEM | | | | | | | | | | | |
| 1. HIGH 2. MEDIUM 3. LOW 4 NGNE 5 UNKNOWN | | | | | | | | | | | |
| 1. HIGH 2. MEDIUM 3. LOW 4 NONE | E5 | UKKNOWN | | OF THE SECOND SE | | | | | | | |
| E. RECOMMENDATION | E5 | UNKNOWN | | | | | | | | | |
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|--|--|--|---|----------------------|--|-------------------------------------|--|-------------------------|--|------------------------|----------------------|-----------------------------|--|--|
| CHARACTERIZATION OF SITE ACTIVITY Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes. | | | | | | | | | | | | | | |
| X . | nicate the major site | ac | 1 | | 3115 | relating to each | T | ith ph weiging , Y, in | ine ap | crangers area | riate boxes | erronische de | A STATE OF THE PARTY OF THE PAR | |
| È | A. TRANSPORT | TER | | | в. : | STORER | × | C. TREATER | MADERICA PHICHICAL | Y X | | | ISPOSER | |
| | 1. RAIL | | | I PILE | | | | I. FILTRATION | | AV | 1. LANDFIL | | | |
| | 2. SHIP | ~~~~ | | | | IMPOUNDMENT | | . INCINERATION | · ···································· | | 2. LANDFA | RΝ | and decourant that he shall his way and an analysis and an analysis of the same and | |
| <u> </u> | 3. BARGE | | | 3. DRUMS | ; | | | B. VOLUME REDUCTIO |) N | _ | B. OPEN DI. | MF | | |
| | 4. TRUCK | ********* | a. | 4. TANK. | ΑE | OVE GROUND | | I. RECYCLING'RECO | VERY | | 4. SURFACE | Ξ 18 | MPOUNDMENT | |
| | 5. PIPELINE | | *************************************** | 5. TANK, | BE | LOW GROUND | | S. CHEM./PHYS, TREA | TMEN | r m | S. MIDNIGH | τc | UMPING | |
| | 6. OTHER (specify): | | | 6. OTHE | ₹ (5 | pecify): | Section. | BIOLOGICAL TREA | TMENT | | 6. INCINER | AT | ION | |
| SK GRAN | | | AD COMP | | | | The Real | 7. WASTE OIL REPRO | CESSIN | G Maria | D. UNDERG | RO | UND INJECTION | |
| NAMES OF STREET | | | | | - | . SOLVENT RECOVER OTHER (specify): | 3.7 | - | 8. OTHER (| spe | clly): | | | |
| Contraction of the contraction o | | | seebankai Insteriora | | | | Name of Street | | | AND SPREASONS PROJECTS | | | | |
| E. | E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED | | | | | | | | | | | | | |
| NO TOTAL COLUMN STATE & 15 transcores | Ventilation inside buildings, gas monitoring equipment for alarm purposes and ventilation activation | | | | | | | | | | | | | |
| | WASTE TWO | | | | | V. WASTE RELA | TED | INFORMATION | NATION TRANSPORTATION OF THE PARTY OF THE PA | STEMPLE STATES OF | | | (C. BOARD), C. STANBERGON, MICHAEL BERGER, STANBERGER, | |
| | A. WASTE TYPE 1 UNKNOWN 2 LIQUID 3. SOLID 4. SLUDGE 5. GAS | | | | | | | | | | | | | |
| | WASTE CHARACTER | _ | | | | | | | - | | | | | |
| | 1. UNKNOWN | 72. | CORPUS | IVE 3 | . 10 | NITABLE 74 | BAD | IOACTIVE TS HI | GHLY V | VOLA | TILE | | | |
| | | _ | REACTI | Loggeral | | | | MMABLE | 0., | | . 1 - 12 4 | | | |
| | | ٦, | NEACT! | / E | 11 | , | | MMADLE | | | | | | |
| ΧÞ | 10. OTHER (suggiff | v): | Metha | ne gas | ~ (| explosion no | ten | tial as well a | | r har | udation | | 7 1 41 1 1 | |
| | WASTE CATEGORIE | | | | <u> </u> | | | <u> </u> | - G- G- C- | <u>u</u> | <u> XIALIUU</u> | | | |
| | . Are records of waste | | vailab!e? | Specify ite | ms | such as manifests, | inve | stories, etc. below. | | | | Q | ccupants. | |
| | | | | | | | | | | | | | | |
| - | ? Estimate the amou | un è e | Connectfu | unit of me | 201 | re) of weete by co | terro | ry; mark 'X' to indica | ta whi | oh u | actae ara n | *05 | ont | |
| - | | uni | | | 180 | | rego | | | | | res | | |
| | a. SLUDGE | A M | b, C | 15 | ١., | c. SOLVENTS | - | d. CHEMICALS | AMOUN | . SOI | | Α δ. | f. OTHER | |
| | | | 00.41 | | - | | | 3.0 O.4 1 | 2101001 | • • | 3 | ~ " | | |
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| | UNIT OF MEASURE UNIT OF MEASURE | | | UNIT OF MEASURE | | erressmenters. | | | | | | | | |
| . X. | (1) PAINT. PIGMENTS | . X. | (1) OILY WAST | ES | ' X ' | (1) HALOGENATED SOLVENTS |) × | (1) A CIDS | 'X' | LYA | 5 H | × | (1) LABORATORY PHARMACEUT. | |
| | (2) METALS SLUDGES | | (2) O T H E | R(specify): | | (2) NON-HALOGNT SOLVENTS | D | (2) PICKLING LIQUORS | (2) 4 | SBE | stos | | (2) HOSPITAL | |
| | (3) POTW | (S) Opposition of the second | | | | (3) OTHER(specify |): | (3) CAUSTICS | | MINE | ING/ TAILINGS | | (3) RADIOACTIVE | |
| | (4) ALUMINUM SLUDGE | | | | PONICO MANAGEMENT OF THE PROPERTY OF THE PROPE | | - | (4) PESTICIDES | (4) § | FERE | OUS G. WASTES | XX | (4) MUNICIPAL | |
| | (5) OTHER(specify): | | | | PROFESSION STATEMENT | | | (3) DYES/INKS | | | FERROUS G. WASTES | | (5) OTHER(specify) | |
| | | ACCOUNT IN COMPANY | | | ACCOUNTS OF THE PARTY | | OCCUPATION | (6) CYANIDE | 1(6) |) THE | R(specify): | distribution and the second | | |
| | | STATE OF THE PROPERTY OF THE P | | | THE PROPERTY OF THE PROPERTY O | | Non-Sacrate Court from | (7) PHENOLS | | | | Managara and Andreas | | |
| | | EDWAYANA TOTAL | | | anconorai printeri | | Construence of the Construence o | (8) HALOGENS | | | | | | |
| | | BW-VGP/BACAZOTURE | | | SCHOOL SC | | | (9) PCB | | | | outst-transpopulation | | |
| | | AND DESCRIPTION OF THE SEC. | | | (Apprinted application | | A CONTRACTOR AND A CONT | (10) METALS | | | | a electronic particular. | | |
| | | | | | Second Se | | TO SECURITION OF THE PERSON OF | (II) OTHER(specify) | | | | approach characteristics. | | |

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

Methane gas - both a concern from a safety view in terms of potential fire & explosions, and asphyxiation.

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

See RVA report March 1979 for complete site survey

| | | 7 | ARD DESCRIPTION | UR T |
|---|--|--|--|------------|
| A. TYPE OF HAZARD | B. POTEN- TIAL HAZARD (merk 'X') | C. ALLEGED INCIDENT (mark 'X') | D. DATE OF INCIDENT (mo.,day,yt.) | E. REMARKS |
| 1. NO HAZARD | | | | |
| 2. HUMAN HEALTH | х | | TRACTION OF THE PROPERTY OF TH | |
| 3. NON-WORKER 3. INJURY/EXPOSURE | | | | |
| 4. WORKER INJURY | The state of the s | | | |
| CONTAMINATION OF WATER SUPPLY | - T | | | |
| 6. CONTAMINATION 6. OF FOOD CHAIN | -50 | | | |
| 7. CONTAMINATION 7. OF GROUND WATER | X | | | |
| 8. OF SURFACE WATER | X | | | |
| 9. DAMAGE TO 9. FLORA/FAUNA | | | · | |
| to. FISH KILL | | | | |
| 11. CONTAMINATION | | | | |
| 12. NOTICEABLE ODORS | | | | |
| 13. CONTAMINATION OF SOIL | | | | |
| 14. PROPERTY DAMAGE | X | | | |
| 15. FIRE OR EXPLOSION | х | | The state of the s | |
| 16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS | | | | |
| 17. SEWER, STORM 17. DRAIN PROBLEMS | х | | | |
| 18. EROSION PROBLEMS | | e de la companya de l | | |
| 19. INADEQUATE SECURITY | | | | |
| 20. INCOMPATIBLE WASTES | | Alaente Constantino | | |
| 21. MIDNIGHT DUMPING | | | | |
| 22. OTHER (specify): | | | | |
| Asphyxiation | Х | Stands something something | With the state of | |

| Continued From Front | | | | and the same of th | | | | | | | |
|--|--|--|----------------------|--|--|--|--|--|--|--|--|
| | Approximation of the second se | VII. PERMIT INFO | DRMATION | | | | | | | | |
| A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE. | | | | | | | | | | | |
| I NPDES PERMIT | 2 SPCC PLAN | 3. STATE PERMIT | (specify): | | | | | | | | |
| 4. AIR PERMITS XX | 4. AIR PERMITS XX 5. LOCAL PERMIT 6. RCRA TRANSPORTER | | | | | | | | | | |
| 7 RCRA STORER 8 RCRA TREATER 9 RCRA DISPOSER | | | | | | | | | | | |
| 10. OTHER (specify): | | | | | | | | | | | |
| B. IN COMPLIANCE? | | | | | | | | | | | |
| 1. YES | 2. NO | 💢 3. UNKNOWN | | | | | | | | | |
| 4. WITH RESPECT TO (list regulation name & number): | | | | | | | | | | | |
| | | VIII. PAST REGULATO | DRY ACTIONS | and the state of t | | | | | | | |
| X A. NONE | B. YES (summarize | below) | | | | | | | | | |
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| | IX. IN | ISPECTION ACTIVITY | (past or on-going) | | | | | | | | |
| A NONE XX B. YES (complete items 1,2,3, & 4 below) | | | | | | | | | | | |
| 1. TYPE OF ACTIVITY | 2 DATE O PAST ACTI (mo., day, & | CN BY: | 4. DESCRIPTION | | | | | | | | |
| | 7.70 | EPA & | mr. 0. 1 | | | | | | | | |
| <u>Preliminary Survey</u> | 7/78 | State | RVA Study | aming personal manggang personal person | | | | | | | |
| | The state of the s | | | | | | | | | | |
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| | X. | REMEDIAL ACTIVITY | Y (past or on-going) | green and the second se | | | | | | | |
| A. NONE | B. YES (complete ite | ems 1, 2, 3, & 4 below) | | | | | | | | | |
| 1. TYPE OF ACTIVITY | 2. DATE (PAST ACT) (mos, day, & | ION BY: | 4. DESCRIPTION | | | | | | | | |
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| | | | | and the second s | | | | | | | |
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| NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form. | | | | | | | | | | | |

EPA Form T2070-2 (10-79)

PAGE 4 OF 4